

As a below-named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed) or an original, first and joint inventor (if plural names are listed) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **Transition Strip for Covering Layers on a Support Surface**, the specification of which:

is attached hereto; or		
was filed on	as Application Serial No.	and was amended on
	,	was filed on as Application Serial No

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR. 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign	Country	Country Foreign Filing Date Priority Not (MM/DD/YYY) Claimed	Priority Not	Certified Copy Attached?	
Application Numbers	Country		Claimed	YES	NO
					0
			0		<u> </u>
			0		

Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit of any United States application(s) listed below.

Application Number(s)	Filing Date		
			Additional application numbers are listed on a supplemental priority data sheet attached hereto.

The undersigned hereby authorizes the U.S. attorney(s) or agent(s) named herein to accept and follow instructions from the assignee, if any, of the undersigned or from ____ as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney(s) or agent(s) and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney(s) or agent(s) named herein will be so notified by the undersigned.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Clark, Jeffrey L.	Reg. No. 29,141	Monco, Dean A.	Reg. No. 30,091
Fairchild, Jeffery N.	Reg. No. 37,825	Mortimer, John S.	Reg. No. 30,407
Geimer, Stephen D.	Reg. No. 28,846	Mueller, Lisa V.	Reg. No. 38,978
Hoover, Allen J.	Reg. No. 24,103	Odell, Paul M.	Reg. No. 28,332
Katz, Martin L.	Reg. No. 25,011	Phillips, Richard S.	Reg. No. 17,314
McLaughlin, F. William	Reg. No. 32,273	Siegel, Joel E.	Reg. No. 25,440

whose mailing address for this application is: WOOD, PHILLIPS, KATZ, CLARK & MORTIMER

Citicorp Center, Suite 3800 500 West Madison Street Chicago, Illinois 60661-2511 Telephone: (312) 876-1800 Facsimile: (312) 876-2020

Customer Number (32116) and/or Bar Code Label:

I hereby declare that all statements made herein of my knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	Jeffrey D. Chassee		
Citizenship:			
Residence:			
Post Office Address (if different):			
Signature:		Date:	
☐ A petition has been filed for this	unsigned inventor.		<u> </u>

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Name of Additional Inventor, if any:	
Citizenship:	
Residence:	
Post Office Address (if different):	
Signature:	D.
	Date:
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